PTO/SB/17 (12-04v2)

, EE					nt and Tradem	oved for use throug ark Office; U.S. DE	PARTMENT OF	COMMERCE
Under the Paperwork Red	uction Act of 1995,	no person are re	equired to	respond to a collection		plete if Know		ontrol number
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL							-Conf. #8256	
				Filing Date July 29, 2003				
			First Named Inventor Alastair Hodg					
For FY 2005				Examiner Name K. K. Olsen			900	
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 1753				
TOTAL AMOUNT OF PAYMENT (\$) 250.00			Attorney Docket No. 104978-0239					
METHOD OF PAYME	NT (check all th	at anniv)		<u> </u>				
x Check Credit		oney Order	No	ne Other	(please ident	ify):		
Deposit Account De	posit Account Numbe	r <u> 141449</u> r	Deposit Ac	count Name:	Nutter	McClennen 8	k Fish LLP	
For the above-ide	ntified deposit a	count, the D	irector is	s hereby authorize	ed to: (chec	k all that apply)		
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee								
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17								
FEE CALCULATION				······································				
1. BASIC FILING, SEARC	•							
		FEES	SE	ARCH FEES	EXAMIN	IATION FEES	;	
Application Type	Fee (\$)	Fee (\$)	Fee (\$	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FEES							S	mall Entity
Fee Description							Fee (\$)	Fee (\$)
Each claim over 20 (inclu	•						50	25
Each independent claim over 3 (including Reissues)								100
Multiple dependent claims	S						360	180
Total Claims Extra	Paid (\$)	<del></del>						
-20 = x =					Fee (\$) Fee Paid (\$)			
Indep. Claims Extra	a Claims Fe	e (\$)	Fee f	Paid (\$)				-
-3=	×	= _						
3. APPLICATION SIZE FE								
If the specification and d listings under 37 CFR	(1.52(e)), the ap	plication siz	e fee du	ie is \$250 (\$125 i				
sheets or fraction ther								
	Extra Sheets		of each a	dditional 50 or fra			Fee Pa	aid (\$)
- 100 =	/	50		(round up to a who	ole number)	×	=	-i-d (6)
4. OTHER FEE(S)  Non-English Specificat	tion \$130 for	(no small and	tity diec	ount)			Fees P	aiO (\$)
Other (e.g., late filing s				ount) sponse within fi	rst month		120	.00
other (e.g., rate filing s		4 Statutory					130	
SUBMITTED BY								
Signature	and			Registration No. (Attorney/Agent)	47,203	Telephone	(617) 439-	2000
Name (Print/Type) Kéviri M	. Cronin	-				Date .	July 11, 2	2005
						·		
I hereby certify that this co	rrespondence is l	neina denocita	Fee T	ransmittal	vice with suf	ficient nostane a	e Firet Claer N	Aail in
an envelope addressed to:	Commissioner t	or Patents	Box 1	450, Alexandria, \	/A 22313-1	450, on the date	shown below.	, III
Dated: July 11, 2005	Signature:		سررر	4-		И. Cronin)		
	oignature.				(LEALL)	Orominj		